

CITY of WINTER GARDEN EVENT VENDOR APPLICATION

All Blanks Marked with * Must Be Completed. Incomplete Applications Will Not Be Processed.

Event: _____ Date & Time: _____

*Group/Company: _____ *Contact: _____

*City _____ *State _____ *Zip _____

*Phone: _____ Fax: _____ E-mail: _____

*Type of Food, Craft or Game: _____

*Indicate # and size of space or spaces you will need (usually 10x10) _____

THE CITY PROVIDES THE SPACE ONLY, NOT TABLES, TENTS, CHAIRS, ETC.

*Need Electricity? Yes _____ No _____

Fees: \$ _____ (payable by cash, check, or money order)

REQUIREMENTS

1. Vendor must provide extension cords.
2. Soap and water required at all food booths.
3. Vendors selling **any** food items must complete an Application for Temporary Event Vendor License issued by the State of Florida Department of Business and Professional Regulation. If you already have a DBR food license, this will not apply to you. You must display this at your booth and be prepared to pay a \$91 fee in the event an inspector visits your booth. These can be obtained at the Winter Garden Recreation Office.
4. Vendor must fill out a Release, Waiver, and Indemnification form and return to the Recreation Office with **original** signature. All fees and paperwork must be received in the Recreation Office prior at least one week prior to the event date.
5. **All vendors must be set up and ready for business by:** _____.
6. **Vendors may not set up before:** _____.
7. **Booths may not close before:** _____.
8. All prices and products to be sold must be approved by the Recreation Department.
9. Roads will be closed to incoming traffic at: _____.

Fees may be paid in person at the Recreation Office or mailed. Checks should be made payable to: City of Winter Garden.

If mailing, please mail to: City of Winter Garden Recreation Dept.
1 Surprise Dr.
Winter Garden, FL 34787

Phone: 407-656-4155

Fax: 407-656-6504

APPROVED: Yes _____ No _____

Jay Conn, Recreation Director